HEALTH FACILITY CONSTRUCTION LOAN INSURANCE

Estimate of Costs and Requisition

OSH-CM-134 (Rev. 04/96)

(Check Applicable Use)

☐ Loan Insurance Application
☐ Distribution of Funds

1. Name of Facility	2. Project Number	3. Disb. No.
Corporate Name (if different)		
4. Address	5. Trustee	

Use of Funds:	Total Project Costs	Disbursed This Requisition	Total Amount Expended to Date	%	Unexpended Balance
I **Project Costs**	$	$	$		$
A. Retire/Defease Existing Debt				#DIV/0!	
B. Acquisition, Cost, Title & Recording				#DIV/0!	0
C. Site Survey & Soil Investigation				#DIV/0!	0
D. Appraisal				#DIV/0!	0
E. Cal-EPA				#DIV/0!	0
F. Architectural/Engineering					
1. Plan Check Fees, Permits, etc.				#DIV/0!	0
2. Contract Architect				#DIV/0!	0
3. Contract Engineer				#DIV/0!	0
4. Other A/E Consultant Fees				#DIV/0!	0
5. Other				#DIV/0!	0
G. Construction					
1. Landscaping				#DIV/0!	0
2. Construction Contracts				#DIV/0!	0
Construction Contract Contingency				#DIV/0!	0
3. Insurance				#DIV/0!	0
4. Material Testing				#DIV/0!	0
5. Owner's Contingency				#DIV/0!	0
6. Other				#DIV/0!	0
H. Fixed/Movable Equipment				#DIV/0!	0
I. Supervision - Inspector				#DIV/0!	0
J. Marketing				#DIV/0!	0
K. Other				#DIV/0!	0
Total Project Costs	**$0**	**$0**	**$0**	**#DIV/0!**	**$0**
II. **Costs of Issuance**					
1. Bond Counsel				#DIV/0!	0
2. Underwriters Counsel				#DIV/0!	0
3. Corporate Counsel				#DIV/0!	0
4. Financial Feasibility				#DIV/0!	0
5. Printing, Rating, Audit, Auth Fee, etc.				#DIV/0!	0
6. Underwriters Discounts				#DIV/0!	0
7. Trustee Fees				#DIV/0!	0
8. Title and Recording				#DIV/0!	0
9. C/M Application Fee ($500)				#DIV/0!	0
10. Financial Advisor				#DIV/0!	0
11. Other				#DIV/0!	0
Total Costs of Issuance	**$0**	**$0**	**$0**	**#DIV/0!**	**$0**
III. **Original Issue Discount/Premium**				#DIV/0!	0
IV. **Debt Service Reserve**				#DIV/0!	0

V.	**Gross Capitalized Interest**				#DIV/0!	0
VI.	**Insurance Premium & Fees**					
	1. Insurance Premium & Reserve				#DIV/0!	0
	2. OSHPD Cert. & Inspec. Fee (0.4%)				#DIV/0!	0
VII.	**Other (Specify)**				**#DIV/0!**	**0**
	Accrued Interest				#DIV/0!	0
VIII.	**Total Use of Funds**	**$0**	**$0**	**$0**	**#DIV/0!**	**$0**

Source of Funds at Closing

1. Bond or COP Proceeds
        Project Account 0
        Capitalized Interest Account 0
        Cost of Issuance Account 0
        Debt Service Reserve Account 0
        Insurance Account 0
        Other ....
2. Investment Earnings Realized ....
3. Future Investment Earnings (Est.) 0
4. Letter of Credit ....
5. Corporate Equity
        Cash 0
        Prepaids ....
        Other 0
6. Funds From Other Sources (Specify) ....

Total Source of Funds — $0
Bond or COP Proceeds — #DIV/0! — $0
Sponsors Assets — #DIV/0! — $0

Certification of Borrower	**Certification of State Representative**
I certify that realty for this project has been conveyed to me and that labor, materials, and services having a value of $_____ has been used in this project in accordance with the approved project agreement and have either been paid for or documented as valid accounts payable. I hereby request insured advance of loan proceeds of said sum for project disbursements.	I hereby certify that, based upon inspection of the work and examination of required documents on _____ ___, 20____, all work, services and materials shown above are incorporated in the project and are in compliance with agreements, regulations and applicable codes. By such, recommendation is made that installment of bond or loan proceeds commensurate with the above expenditures be disbursed by Trustee.
Owner's Name and Title (Typed)	Name and Title of State Representative (Typed)
Signature	Signature
Date	Date